

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input type="checkbox"/> Declaration Submitted with Initial Filing OR <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)		Attorney Docket Number	A36066
		First Named Inventor	Stefan Schneidewind
		COMPLETE IF KNOWN	
		Application Number	10/699,121
		Filing Date	October 31, 2003
		Group Art Unit	2858
		Examiner Name	(Not Yet Assigned)

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

METHOD AND APPARATUS FOR TESTING MOVEMENT-SENSITIVE SUBSTRATES

(Title of the Invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) 10/31/2003 as United States Application Number or PCT International

Application Number 10/699,121 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
102 51 377.5	GERMANY	11/01/2002	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
102 58 375.7	GERMANY	12/12/2002	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

DECLARATION — Utility or Design Patent Application**Claim for Benefit of Prior U.S. Provisional Application(s)**

I hereby claim the benefit under Title 35, United States Code, § 119(e) of any United States provisional application(s) listed below:

Provisional Application Number	Filing Date

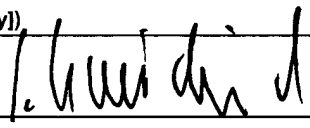
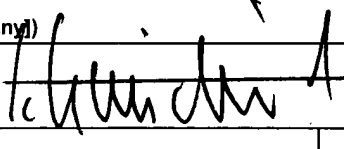
Claim for Benefit of Earlier U.S./PCT Application(s) under 35 U.S.C. 120

(complete this part only if this is a divisional, continuation or C-I-P application)

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior application(s) in the manner provided by the first paragraph of Title 35, United States Code § 112, I acknowledge the duty to disclose information as defined in Title 37, Code of Federal Regulations, Section 1.56 which occurred between the filing date of the prior applications(s) and the national or PCT international filing date of this application:

Application Number	Filing Date	Status (patented, pending, abandoned)

DECLARATION — Utility or Design Patent Application

Direct all correspondence to: <input checked="" type="checkbox"/>		Customer Number or Bar Code Label	21003	OR <input checked="" type="checkbox"/>	Correspondence address below
Name					
Address					
City		State		ZIP	
Country		Telephone		Fax	
<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.</p>					
NAME OF SOLE OR FIRST INVENTOR :		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
STEFAN Given Name (first and middle [if any])		SCHNEIDEWIND Family Name or Surname			
Inventor's Signature 				Date 12.1.04	
REICHENBERG Residence: City		State		GERMANY Country	
AM FELD 7 Mailing Address				GERMANY Citizenship	
REICHENBERG City		State		01468 ZIP	
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
CLAUS Given Name (first and middle [if any])		DIETRICH Family Name or Surname			
Inventor's Signature 				Date 12.1.04	
SACKA Residence: City		State		GERMANY Country	
TAUSCHAEER STRASSE 19 Mailing Address				GERMANY Citizenship	
SACKA City		State		01561 ZIP	
Country		Country			
<input type="checkbox"/> Additional inventors are being named on the ____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.					

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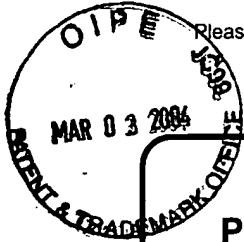


DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page ___ of ___

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
JORG		KIESEWETTER	
Inventor's Signature <i>J. Kiese</i>		Date <i>15. Jan. 04</i>	
DRESDEN Residence: City	State	GERMANY Country	GERMANY Citizenship
GOHRENER WEG 27/601 Mailing Address			
Mailing Address			
DRESDEN City	State	01109 ZIP	GERMANY Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
FRANK-MICHAEL		WERNER	
Inventor's Signature <i>Frank-Michael Werner</i>		Date <i>13 Jan. 2004</i>	
DRESDEN Residence: City	State	GERMANY Country	GERMANY Citizenship
BULGAKOWSTRASSE 28 Mailing Address			
Mailing Address			
DRESDEN City	State	01217 ZIP	GERMANY Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	ZIP	Country

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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

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Filing Date	October 31, 2003
First Named Inventor	Stefan Schneidewind
Group Art Unit	2858
Examiner Name	(Not Yet Assigned)
Attorney Docket Number	A36066

I hereby appoint:

☒ Practitioners at Customer Number

21003

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Number Bar Code
Label here

☐ Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

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Zip

Country

Telephone

Fax

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name

STEFAN SCHNEIDEWIND

Signature

Date

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐ *Total of _____ forms are submitted.



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Name

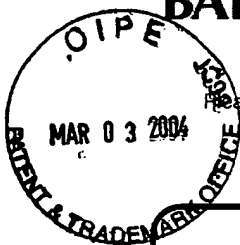
CLAUS DIETRICH

Signature

Date

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SIGNATURE of Applicant or Assignee of Record

Name

JORG KIESEWETTER

Signature

Date

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MAR 03 2004

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SIGNATURE of Applicant or Assignee of Record

Name	FRANK-MICHAEL WERNER
Signature	
Date	13. Jan. 2004

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